Communities Applied Policy Strategies

IDENTIFICATION NUMBER: C00570531

REFERENCE: YEAR-END REPORT

I spoke with Marlene Colucci in the Reports Analysis Division on Feb 23, 2015. I have made the necessary date corrections and have re-submitted the AMENDED report with the correct dates.

Robert Martinez

150M - 140 - 2157

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2015 MAR - Guse 14-10: 56

1.	NAME OF		
	COMMITTEE	(in	full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4MS MAIL CENTER

Communities Applied I	Policy Stratec	jies, , , , , ,			1111	11111	
					1 1 1	1 1 1 1 1	
ADDRESS (number and street)	7654 Isle	y Avenue				1111	
Check if different than previously reported. (ACC)	Las Vega	s			NV]	89147	4003
2. FEC IDENTIFICATION NU	MBER ▼	CITY A		S	TATE A	ZIP COL	DE 🛦
C 0057053	1	3. IS THIS REPORT	O (N)		X AM (A)	ENDED	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Quarterly Report (Non-election Year Only) (MY) Termination Report (TER)	(c) 12-Da PRE-E Report (d) 30-Da POST	Election t for the: C Election on	Jul Primary (12P) Convention (12		Sep :	20 (M9) 20 (M10) 20 (M10) 212G) 212S) in the State of	Special (30S)
I certify that I have examined this	s Report and to t	he hest of my know		line lit is true	Correct and	Learning	
Type or Print Name of Treasure	-	Martinez	euge and be	inei II IS True	, correct and	ompiete.	
Signature of Treasurer NOTE: Submission of false, errone	OLT.	-nd) ject the perso	Dá	Benga Mac	1 19°) ' [ŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽŽ
Office Use Only)	FEC FOR	M 3X

1503 - 140 · 2158

.FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	
Write or Type Committee Name		
Communities Applied Policy S	Strategies	
Report Covering the Period: From:	11 (25) (2014) To	i 12 / 31 / 2014
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		
(b) Cash on Hand at Beginning of Reporting Period	0.00	
(c) Total Receipts (from Line 19)	0.00	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	000	0.00
7. Total Disbursements (from Line 31)	0.00	OOOO
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0.00	0.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a multic	candidate committee. (see FEC FORM 1M)	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FE6AN026

DETAILED SUMMARY PAGEof Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Communities Applied Policy Strategies

	Total This Period	COLUMN B Calendar Year-to-Date		
Contributions (other than loans) From: (a) Individuals/Persons Other				
(-)	Statement Construction and Construction reserved by the medical and the present Construction of the present of			
(i) Itemized (use Schedule A)	0.00	0.00		
1.000	The contract of the state of th	Enternational control of the control		
(ii) Unitemized	0.00 f	U.U U		
() 10 11 12 (233	0.00	Canadaministrant de medicare de maria d		
Lines 11(a)(i) and (ii)	Language Commission Co	termental and the advantage of the formation of the control of the		
(b) Political Party Committees	0.00	0.00		
Reserve	three of a to the second and the sec	Brainstitum sitti maan kan mitaan ah samatan sa ta'a sa		
(such as PACs)	O.OO §	0.00		
(d) Total Contributions (add Lines		•		
, , (a)(), (b), and (b), (bally	0.00	0. 0 0		
	A manufactural later Access of motion lateral manufactural lateral lat	Andrew Control of the		
Party Committees	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	0.00		
Lanca gravas	de rachamalara dera de seral recolono de la contra del la contra de la contra de la contra del	bereichen der witzen Sander ung zu eine Ausgeschaft und fest der Ausgeschaft und fest der Ausgeschaft und fest		
I3. All Loans Received	O O	0.00 l		
	Designation of marketing the second s	น้องเป็นมหมืออนใหม่ระได้เราะรับสมาณิชานที่ในกลเป็นกลเป็นกลเ		
4. Loan Repayments Received	O. O O J	0.00		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		· · · · · · · · · · · · · · · · · · ·		
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00		
16. Refunds of Contributions Made	dineral model have been been been broadly read wood broadly read	Learning of the section of the section of the section of the section of		
to Federal Candidates and Other	Character acceleration and canadian adversarily acceleration and	Enrice Annual Survey Su		
Political Committees	0.00 j	0. 0 0		
17. Other Federal Receipts	0.00			
(Dividends, Interest, etc.)	Anna Brand Brand Brand Brand Brand Brand Brand Brand Brand	moderne dansk brinderse breed breeders dansk brinderse breeders		
A S. A.C. Proc. II. A.A. A.		0.0 0		
(from Schedule H3)	0.00	· 1		
, contract	Contract mentions throughtoning beneather with the contract of	Martin Samuello uzali samajani ana silanca Martin Samajan and samasa samasa saman salah saman salah saman salah		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
green	COO	6.00		
(c) Total Transfers (add 18(a) and 18(b))	U.UU	in the continued live of the continued live		
 Total Receipts (add Lines 11(d); 	Zaradza sekszadkonadaceatkaminasattanova usacemadi	Committee and the contraction of		
12, 13, 14, 15, 16, 17, and 18(c))▶	0.00 f	0.00 properties and the contract of the contra		
20 Total Fadoral Bassints		٠.		
(subtract Line 18(c) from Line 19)▶	O.O. and the contraction of the	0.00		
	Executions (Struction of Struction (Struction)	lane the west word down from Some Vores Some Some Sound west		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

-	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Operating Expenditures: (a) Allocated Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	A contract the second s	Franciscus in material services de la company de la compan
	(ii) Non-Federal Share	0.00	0.00
1	(b) Other Federal Operating Expenditures	The contraction of the contracti	hamiltonia franches de la company de la comp
	(c) Total Operating Expenditures	The second secon	Montal and Same Sycamore and an antimate for made and a second se
	(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
22.	Transfers to Affiliated/Other Party		The second secon
	Committees	0.00 f	Boundary China Control of the Contro
	Federal Candidates/Committees and Other Political Committees	0.00	0.00
	Independent Expenditures	The state of the s	Transferent and transferent frame frame described and transferent frame frame of the section of
25	(use Schedule E)		U.UU I
	(2 U.S.C. §441a(d))	0.00	0.00
	(use Schedule F)	the second in the second secon	The state of the s
26.	Loan Repayments Made	0.00	0.00
		Consideration of the constant	
27.	Loans Made	0.00	2
	Refunds of Contributions To: (a) Individuals/Persons Other	teach with the contract the con	
	Than Political Committees	Complement of the section of the sec	house the market and the selection of the selection of the selection of
	(h) Balitical Both, Committees	0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	Commentaries of the state of th	
	(such as PACs)	0.00	8
	·	Comment and Commen	han and the confirment Describer and the confirment to the confirment of the confirm
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))▶		Andread Andread Andread Power Land Control of the C
20	Other Disbursements	0.00	0.00
25.	Cition Dispursonicities	Samuel and been been Could be a land beauther of been linear and	Considerational Description of Consideration Consideration of Consideratio
30.	Federal Election Activity (2 U.S.C. §431(20))		
•	(a) Allocated Federal Election Activity	•	
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	want bearing the Mount well bearing and bearing the	handard 22 marin 12 marin 12
	(ii) "Levin" Shara	0.00	0.00 k
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	The state of the s	Constitution of the company of the contract of
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	Surgest mand transfer and knowled association and hearest armed a second and the second and the second association and the second association and the second association and the second association as the second as the	linnen lann a kanada makan kan kan kan kan kan kan kan kan kan
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00 j	0.00 g
21	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	U UU	0.00
	,,,,,,,,	0.00 f	de mande con de de mande de constituent de constituent de la constituent de la constituent de la constituent de
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	นี้เทรายในเหลาก็ในและเป็นและสำนาจาดีเนเลานี้แกรเลงโลกาละน้ำแนกเป้าและเล่นแลมเน็	ในกรายในเทศในเทศใหล่เหมือนเป็นเหมือนเป็นเหมือนเป็นเหมือนเหมือนเหมือนเหมือนเหมือน
	from Line 31)	0.00	0.00
		A AMBRICAN TO COME DE COLORE : THE COLORES AND	
		·	the state of the s

of Disbursements

111	Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)		Security and Secur
34.	Total Contribution Refunds (from Line 28(d))	0.00	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)		0.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶		
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	to continue to the continue to	Securit de son de la constant de la Constant de la constant de la

SCHEDULE A (FEC FOIIII 3A)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
TEMIZED RECEIPTS		11a 11b 11c 12
Any information copied from such Departs and Statements —		13 14 15 16 17
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and a		
NAME OF COMMITTEE (In Full) Communities A	pplied Policy Strategies	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		Date of receipt
City State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	and primary primary primary primary primary primary.	
Name of Employer Occupation		
Primary General Other (specify)	Year-to-Date ▼ 0.00	
Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		
City State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		0.00
Name of Employer Occupation	1	1
Primary General	Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		Car \ Leads \ And a And a And a
City State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	and the second control of the second control	
Name of Employer Occupation	n	
Primary General Other (specify) ▼	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	•	O. O O
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X)

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE		OF	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only			¬
	Detailed Summary Page	21b	22 28a 2	3 24 8b 28c	$\begin{array}{c c} -25 & -26 \\ 29 & -30b \end{array}$
A sistematical formula December and Obstantia					_1
Any information copied from such Reports and Staten or for commercial purposes, other than using the name	nents may not be sold of used ne and address of any political	oy any pers	on for the purpo: o solicit contributi	se of soliciting of ions from such	committee.
NAME OF COMMITTEE (In Full)	ing Ameliad Delias CA				
Communii	ties Applied Policy St	rategies			
Cull Alexand / and Cined Adiddle Initial)					
Full Name (Last, First, Middle Initial)			Date of Disbu	ursement	
•				September 1 September 1	소 소.
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
Tulpose of Dispulsement		na milinimalia menti	Amount of Ea	ach Disburseme	nt this Period
Candidate Name	t	Category/	- Constitution (Constitution (manther afferent teach.	0.00
		Туре	<u></u>		0.00
Office Sought: House Disburser	_				
Senate	Primary General Other (specify) ▼				
State: District:	Outer (opcomy)				
Full Name (Last, First, Middle Initial)					
3.			Date of Disb	ursement	
			Land L	7 T	A.A.A.A.
Mailing Address			L		
City	State Zip Code				
Purpose of Disbursement		month market			
				ach Disburseme	
Candidate Name		Category/		mentioned acoustiness.	0.00
Office Sought: House Disburser	mont For:	Туре	Insurance Count V	Sandras Sand Sand	
Senate Dispurser	Primary General				
President	Other (specify) ▼		•		
State: District:					
Full Name (Last, First, Middle Initial)					
) .			Date of Disb	ursement	
Mailing Address			Man,	DAD / TA	A & A & A
City	State Zip Code				
Ony	State Zip Gode				
Purpose of Disbursement	1	CACCOLORS COME			
Candidate Name				ach Disburseme	ent this Period
Cariologie Name		Category/ Type		Market Same Same Same Same Same Same Same Same	0:00
Office Sought: House Disburse	ment For:	Турс	- 		Sand Comment
Senate	Primary General				
President	Other (specify) ▼]		
State: District:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	1		
SUBTOTAL of Disbursements This Page (optional)					0.00
			Daniel Control	and market from Some	
TOTAL This Period (last page this line number only)	······	Constituent sound	Same Control Same	U.U.

SCHEDULE C	(FEC	Form	3X)
LOANS			

LOANS	for each category of the Detailed Summary Page FOR LINE 13 OF FORM 3X
NAME OF COMMITTEE (In Full) Communities Applied Policy	Strategies
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: Primary General
Mailing Address	Other (specify) ▼
City State ZIP Code	e
Original Amount of Loan Cumulative Payment To [0.00
	Interest Rate Secured: (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Name of Employer
1. Full Marie (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	0.00
TOTALS This Period (last page in this line only)	O. O O
Carry outstanding balance only to LINE 3. Schedule D. for this line, if n	to Schedule D. carry forward to appropriate line of Summary

150M - 140 - 2165

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463		rage or concease of
NAME OF COMMITTEE (In Full) Communities A	Applied Policy Strategies	FEC IDENTIFICATION NUMBER
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	0.00 0%,
Mailing Address City State Zip Code	Date Incurred or Established Date Due	
A. Has loan been restructured? No Yes	If yes, date originally incurred	
B. If line of credit, Amount of this Draw:	0.00 Balance	0.00
C. Are other parties secondarily liable for the debt incur No Yes (Endorsers and guarantors m	rred? nust be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates o stocks, accounts receivable, cash on deposit, or othe No Yes If yes, specify:	of deposit, chattel papers,	What is the value of this collateral? 0.00 Does the lender have a perfected security
E. Are any future contributions or future receipts of intercollateral for the loan? No Yes If yes,	rest income, pledged as specify:	what is the estimated value?
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	
Date account established:	Address: City, State, Zip:	
F. If neither of the types of collateral described above w the loan amount, state the basis upon which this loan	vas pledged for this loan, or if the	
G. COMMITTEE TREASURER Typed Name Robert Martinez Signature		DATE 01 ' 19 ' 2015'
H. Attach a signed copy of the loan agreement.		
TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the tare accurate as stated above. The loan was made on terms and conditions (is similar extensions of credit to other borrowers of the institution is aware of the requirement that complied with the requirements set forth at 11 complied.	including interest rate) no more fa of comparable credit worthiness. t a loan must be made on a basis	vorable at the time than those imposed for s which assures repayment, and has
AUTHORIZED REPRESENTATIVE		DATE
Typed Name Signature	Title	CONTRACTOR OF THE PARTY OF THE

DEBTS AND OBLIGATIONS		(Use ser	parate	e PAGE OF	
		schedule(s)		FOR LINE NUMBER:	
Excluding Loans		for ea numbere		(check only one) 9	
NAME OF COMMITTEE (In Full)					
A. Full Name (Last, First, Middle Initial) of Debt	or or Creditor	Nat	ure of D	ebt (Purpose):	
an reality (case, rine, minute minute) of Debte	<i>-</i>	1,40		out (- uipodo).	
	 .				
Mailing Address					
City State	Zip Code				
	·				
Outstanding Balance Beginning This Period				,	
0.00					
Amount Incurred This Period	Payment This Period	_	utstandi	ng Balance at Close of This Period	
0.00	has a recommendate the second section of			0.00	
Convertinger Character Theory Secure Transaction (Convertinger Character)	U.			DU.U	
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Na	ure of D	ebt (Purpose):	
Mailing Address					
City State	Zip Code	7			
Outstanding Delegan Death in The Delegan					
Outstanding Balance Beginning This Period					
O. O O					
Amount Incurred This Period	Payment This Period		Outstandi	ng Balance at Close of This Period	
0.00	0.	.00		0.00	
None demonstrated Inventores and Proceedings and Comment of the Co	Francisco Santa Company Compan				
C. Full Name (Last, First, Middle Initial) of Debi	or or Creditor	Na	ture of D	lebt (Purpose):	
	<u>-</u>				
Mailing Address					
City	State Zip Code				
Outstanding Balance Beginning This Period					
income and in our placement for committee or the second contraction and in second in s	•			•	
Amount incurred This Period	Payment This Period	c)utstandi	ng Balance at Close of This Period	
Secretary descriptions for the secretary of the secretary	Taymon This rend			annelinennika unuttarinitarinitarinitarinitarinitarinitarini	
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		1	zaen/hanaelh		
1) SUBTOTALS This Period This Page (optional).		▶	mes kample	U.UU Landadistandistandistandistandistandistandistandistandistandistandistandistandistandistandistandistandistandis	
2) TOTALS This Period (last page this line number	or only)		nsardamnish.	0.00	
2) TOTALS This Period (last page this line number			and read	mentioned and make a factor of the control of the c	
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	▶		\$ 00.0 kms/ms/ms/ms/www.treets/www.treets/www.treets	
4) ADD 2) and 3) and carry forward to appropriate	line of Summany Dage (lost name)		name of the second	0.00	
i -, zi anu oj anu cany iorwaru to appropriati	o mile or cummary rage (last page of	:::y <i>) ►</i> §	<u>×</u>		

SCHEDULE E (FEC Form 3X)	
ITEMIZED INDEPENDENT EXPENDITURES	PAGE OF FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Communities Applied Policy St	
Check if 24-hour report 48-hour report New report A	Amends report filed on
Full Name (Last, First, Middle Initial) of Payee	Date
	Date / Date / Vavavavav
Mailing Address	Amount
City State Zip Code	0.00
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
	Herma / Lead / Arrasasas
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Uniternized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	0.00
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.	herein were not made in cooperation, consultation, or concert e or agent of either, or (if the reporting entity is not a political
ILLET 1402	Date 01 19 2015
Signature	Compaffigured December Compaffigures Compaff

SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election) FOR LINE 25 OF FORM 3X NAME OF COMMITTEE (In Full) Communities Applied Policy Strategies Full Name of Subordinate Committee Has your committee been designated to make coordinated expenditures by a political party committee? YES ☐ NO If YES, name the designating committee: Mailing Address City ZIP Code State Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date City State Zip Code Name of Federal Candidate Supported Office Sought: House State: **Amount** Senate District: 0.00 Presidential Aggregate General Election Expenditure for this Candidate Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure Category/ Mailing Address Type Date State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: 0.00 Presidential Aggregate General Election Expenditure for this Candidate Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure Category/ Mailing Address Type Date City State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: 0.00 Presidential Aggregate General Election Expenditure for this Candidate SUBTOTAL of Expenditures This Page (optional). TOTAL This Period (last page this line number only).....

PAGE

OF

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full) Communities Applied Policy Strategies
USE ONLY ONE SECTION, A or B
A. State and Local Party Committees
Fixed Percentage (select one)
Presidential-Only Election Year (28% Federal)
Presidential and Senate Election Year (36% Federal)
Senate-Only Election Year (21% Federal)
Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees
Flat Minimum Federal Percentage
If the committee will allocate using the flat minimum percentage of 50% federal funds, check Or
If the committee is spending more than 50% federal funds, indicate ratio below
Federal %
Nonfederal
This ratio applies to (check all that apply):
Administrative Generic Voter Drive Public Communications Referencing Party Only

150% 140 2170

CHEDULE H2 (FEC Fo LLOCATION RATIOS	•		PAGE OF
AME OF COMMITTEE (In Full)	Communities Applied Policy St	rategies	
ATIOS FOR ALLOCABLE FUN CTIVITIES APPEARING ON TH	DRAISING EVENTS AND DIRECT CAND IIS REPORT.	IDATE SUPPORT	
lethods of allocation:	,		
	are allocated using the "funds received to federal proportion of monies raised.	method" where the federal pr	oportion of
where the federal propor tivity. For PACs Only: D	DATE SUPPORT activities are allocated a rtion of disbursements is based on the be birect candidate support includes public or candidates, regardless of whether there is ne/space method.	enefit derived by federal cand ommunications or voter drives	lidates from the ac- s that refer to both
ACTIVITY OR EVENT IDENTIFIE	R	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising CHECK IF THE RATIO IS: New Revised	Direct Candidate Support Same as Previously Reported	0%%	0%
ACTIVITY OR EVENT IDENTIFIE			
ACTIVITY IS:		FEDERAL %	NONFEDERAL %
Fundraising D CHECK IF THE RATIO IS:	Direct Candidate Support	0%	landina Continue 3
New Revised	Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIE		FEDERAL %	NONFEDERAL %
CHECK IF THE RATIO IS:	Direct Candidate Support	woodnesday Charleson %	%
New Revised	Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIE	.R 	FEDERAL %	NONFEDERAL %
CHECK IF THE RATIO IS:	Direct Candidate Support	www.commission.com	San call records and I have discussed %
New Revised	Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIE	,rs	FEDERAL %	NONFEDERAL %
CHECK IF THE RATIO IS:	Direct Candidate Support	%	%
New Revised	Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIE	.R	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising CHECK IF THE BATIO IS:	Direct Candidate Support	0 %	0 %

Same as Previously Reported

New

Revised

1503-140-2171

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE	С	F		
FOR LINE	18a	OF	FORM	3X

NAME OF COMMITTEE (In Full) Communit	ties Applied Policy Strategies	
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
	LACAT \ BABA \ LASARA	0.00 s
		Biomedianumikeuns Azazzianen Banari Hayari annetaran Eduardian az
BREAKDOWN OF TRANSFER RECEIVED		the said the
i) Total Administrative		
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II) Comparie Madeu Baire		
ii) Generic Voter Drive		harden the standard and the standard the sta
·		
iii) Exempt Activities		0. 0 U
iv) Direct Fundraising (List Activity or Event	Identifier)	•,
	Consultanies/Indexthrough and Consultanies/C	action and
a)		· ·
b)	1)
	- Complement Consideration of Considerat	Constitution of the contract o
c) Total Amount Transferred For Direct Fun	ndraising	0.00
c) total Ambunt Hansiered For Breek Full	ididising	Para all was district the and beautiful and I have the model and I have been all
v) Direct Candidate Support (List Activity or	Event Identifier)	
		NUMBER OF THE PROPERTY OF THE
a)	0. (0 0
	Sandan Carilland weedly all lands and the	್ಕ್ ಪ್ರೀಟಾಕ್ಸ್
b)	0.0	0'0'
0)	Committee and the country of the	केन्द्रास्त्रका कार्या कार्या कार्या विकास विकास विकास के स्वता क्षेत्रका क्षित्रका कार्या कार्या कार्या कार्य कार्युक्त कार्यु
c) Iotal Amount Transferred For Direct Car	ndidate Support	U.UU
		O. O O
	,	hunchisachteantheacht dans hunchisacht der
TOTALS	FOR BREAKDOWN OF TRANSFER RECI	
TOTAL This Period (Administrative)		0.00
	Company of the Compan	Theoretic manufactures to sense the sense of
TOTAL This Period (Generic Voter Drive)		0.00
TOTAL THIS I GHOW (GONGHO VOICE DIEVE)	faces person before the second	ในเกลด์ไรเลสน์ ปีเมษาล์ แนะเราโดยการนี้ เป็นเพลร์ไรเลสน์ใ
	~ ~	0 0 0
TOTAL This Period (Exempt Activities)	and parent parent	Teaming with the antimental team and the antimental teams of the antimental te
	Section Character Characte	dional framilian disease disea
TOTAL This Period (Direct Fundraising)	Paramotra con	0.00 f
•	Sharmer .	all more than a clause all man a clause in the analysis and trace and a complete and the co
TOTAL This Period (Direct Candidate Support)	200	0.00 fi
	-	Remote verificated and anathratic residence for Section 200 and
TOTAL This Period (Public Communications Refer	ring Only to Party)	0.00
This i ones (abile Communications relet)	any only to raity)	
TOTAL This David Colol A		0.00 g
TOTAL This Period (Total Amount Transferred)	······································	Comment and the second and the s
	ls.	

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SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	OF	
FOR LINE		

NA	ME OF COMMITTEE (In Full) Communities Applied Pol	licy Strategi	es
A .	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:
	Mailing Address		Administrative Fundraising Exempt Voter Drive Direct Candidate Support
	City State Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:	T	Allocated Activity or Event Year-To-Date
	Ashibb as Creat Idealifice		0.00
	Activity or Event Identifier:	Category/ Type	Date /
	FEDERAL SHARE + NONFEDERAL	SHARE	= TOTAL AMOUNT
	0.00	0.00	0.00
B .	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:
	Mailing Address		Administrative Fundraising Exempt
	City State Zip Code	_	Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
		т	Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:	Committee Committee	
	Activity or Event Identifier:	Category/	Landalla Landada Ladala
		Туре	Date Committee C
	FEDERAL SHARE + NONFEDERA		= TOTAL AMOUNT
	0.00	0.00	0.00
Ç.	Full Name (Last, First, Middle Initial)		Allocated Activity or Event: Administrative Fundraising Exempt
	Mailing Address		Voter Drive Direct Candidate Support
	City State Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:	Samuel and Image!	Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:		Remarkant track transferred transferred transferred
		Category/ Type	Date / Doo / Vryyy
	FEDERAL SHARE + NONFEDERAL		= TOTAL AMOUNT
	0.00	0.00	0.00
SI	JBTOTAL of Allocated Federal and NonFederal Activity This Page		
	FEDERAL SHARE + NONFEDERAL	SHARE 0.00	TOTAL AMOUNT
Т/	O. 00 DTAL This Period (last page for each line only)(Federal share to 21(a)(i) an		
•	FEDERAL SHARE NONFEDERAL	SHARE	TOTAL AMOUNT
	0.00	0.00	0.00

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE	=	С	F		
FOR	LINE	18b	OF	FORM	3X

NAME OF COMMITTEE (In Full) Comm	unities Applied F	Policy Strategies		
NAME OF ACCOUNT		TOTAL AMOUNT TRANSFERRED O. O O		
BREAKDOWN OF THIS TRANSFER				
i) Voter Registration		ER REGISTRATION		
Total Amount Transferred for Vote	r Registration	0.00		
ii) Voter ID	5 "			
Total Amount Transferred for Vote	r ID	เลือง (18 วิวาะเครื่อง เลาร์ ก็เลย (18 กับ (18 เลี้ยง (18 กับ (18 กั		
iii) GOTV		COLA		
Total Amount Transferred for GOT	ν	0.00		
iv) Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY		
Total Amount Transferred for Gene	eric Campaign Activity	0.00		
		रिक्तान करियान कराती है तेन काली अभिनेता करती है कि कार विकास करती है कि काली करती है कि काली करता है कि काली करता करता है कि काली करता है क		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED		
	IN A VIOLOTIA	0.00		
	harden backers backers	Boundham Standard Loundham Commission Commis		
BREAKDOWN OF THIS TRANSFER	-			
i) Voter Registration	VOT	ER REGISTRATION		
Total Amount Transferred for Vote	r Registration	3 0.00 g		
ii) Voter ID		VOTER ID		
Total Amount Transferred for Vote	r ID	0.00		
iii) GOTV	•	GOTV		
Total Amount Transferred for GOT	v	0.00		
		describe and a control of the contr		
iv) Generic Campaign Activity Total Amount Transferred for Gen	eric Campaign Activity	0.00		
	one campaign name	Carried reconstituent de constituent		
TOTALS FOR BI	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)			
TOTAL This Period (Voter Registration)		nganasyonanganangananganangananganangananganan		
TOTAL This Period (Voter ID)	Surethern	O. O O		
TOTAL This Period (GOTV)				
TOTAL This Period (Generic Campaign	Activity)	0.00		
TOTAL This Period (Total Amount of Tra	nsters Received)	Inserting and her collected to an advantage of the contract of		

150% 140 2174

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE OF
FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full) Commu	nities Applied Polic	y Strategies	-
A. Full Name (Last, First, Middle Initial) / Full O	rganization Name		Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign
Mailing Address			Allocated Activity or Event Year-To-Date 0.00
City State	Zip Code	Constitution of the same	
Purpose of Disbursement		Category/ Type	Date Date
FEDERAL SHARE 0.00		0.00	= TOTAL AMOUNT 0.00
B. Full Name (Last, First, Middle Initial) / Full O	organization Name		Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign
Mailing Address	Vin Code		Allocated Activity or Event Year-To-Date
Purpose of Disbursement	Zip Code	Category/ Type	Date Consideration Cons
	+ LEVIN SHA		= TOTAL AMOUNT
The second secon			0.00
C. Full Name (Last, First, Middle Initial) / Full C	Organization Name		Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign
Mailing Address			Allocated Activity or Event Year-To-Date
City State	Zip Code		
Purpose of Disbursement		Category/ Type	Date
	+ LEVIN SHA		= TOTAL AMOUNT
general consideration of the second consideration of the s			0.00
SUBTOTAL of Shared Federal and Levin Activity T	his Page		
0.00	+ LEVIN SH/		TOTAL AMOUNT 0.00
TOTAL This Period (last page for each line only)(F FEDERAL SHARE	ederal share to 30(a)(i) and	contract Secret Secret	TOTAL AMOUNT
	LEVIN SHA		0.00
TOTAL This Period for the Levin Share		" " 0: 0°0	722mms:

SCHEDULE L (FEC Form 3X):

AGGREGATION PAGE: LEVIN FUNDS

NAM	NAME OF COMMITTEE (In Full) Communities Applied Policy Strategies				
NAM	E OF ACCOUNT				
· · · · · · · ·		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE		
1.	RECEIPTS FROM PERSONS (a) Itemized(Use Schedule L-A)	0.00 k	composer grant and property of the composer of		
	(b) Unitemized	$\begin{array}{c} \\ 0.00 \\ \end{array}$	$\begin{array}{c} 0.00 \\ 0.00 \end{array}$		
	(c) Total	O. O O	grammer and the control of the contr		
2 .	OTHER RECEIPTS		0.000		
3.	TOTAL RECEIPTS(Add Lines 1c and 2)	0.00	0.00 हैं		
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)				
	(a) Voter Registration	have been been been been been been been be	0.00		
	(b) Voter ID	the state of the s	person grant and proving proving proving the configuration of the config		
	(c) GOTV	American handran from the reference to the responsibility of the r			
	(d) Generic Campaign	0.00 leading the control of the cont			
5.	OTHER DISBURSEMENTS	0.00			
6.	TOTAL DISBURSEMENTS(Add Lines 4e and 5)	0.00			
7.	BEGINNING CASH ON HAND(for Calumn B, use cash as of January 1st)	0.00	$\begin{array}{cccccccccccccccccccccccccccccccccccc$		
8.	RECEIPTS(from Line 3)		$\begin{array}{c} 0.00 \\ \end{array}$		
9.	SUBTOTAL(Add Lines 7 and 8)	0.00 p	0.00 f		
10.	DISBURSEMENTS(From Line 6)		COO O		
11.	ENDING CASH ON HAND (Subtract Line 10 From Line 9)	0.00	0.000		

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SCHEDULE L-A (FEC Form 3X)

PAGE OF Use separate schedule(s) ITEMIZED RECEIPTS OF LEVIN FUNDS FOR LINE NUMBER: for each category of the Aggregation Page (check only one) Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Communities Applied Policy Strategies** Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt Mailing Address Amount of Each Receipt this Period City State Zip Code 0.00Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation 0.00 Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt B. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation 0.00 Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation 0.00SUBTOTAL of Receipts This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

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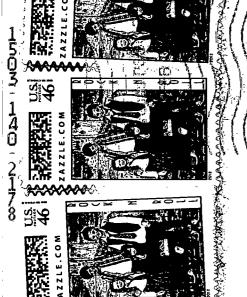
SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

Use separate schedule(s) for each category of the Aggregation Page

FOR LINE NUMBER:	PAG	ιE	OF
(check only one)	4a 4b	4c 4d	5

OF LEVIN FUNDS	Aggregation Page	4b 4d	
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and ad-			
NAME OF COMMITTEE (In Full)	Applied Policy Strategies		
Full Name (Last, First, Middle Initial) / Full Organization Nam	ne	Date of Disbursement	
Mailing Address			
City State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		0.00	
Full Name (Last, First, Middle Initial) / Full Organization Nam	ne	Date of Dishumomont	
8.		Date of Disbursement	
Mailing Address			
City State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			
Full Name (Last, First, Middle Initial) / Full Organization Name	те	Date of Dichureament	
⊍.		Date of Disbursement	
Mailing Address			
City State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			
Full Name (Last, First, Middle Initial) / Full Organization Name	ne	Date of Diskursers	
υ.		Date of Disbursement	
Mailing Address		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
City State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			
Full Name (Last, First, Middle Initial) / Full Organization Nam	пе		
Е.		Date of Disbursement	
Mailing Address			
City State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			
SUBTOTAL of Disbursements This Page (optional)		0.00	
TOTAL This Period (last page this line number only)		0.00	

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Hand Delivered	Date of Receipt
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USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
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PREPARER (8/2013)	DATE PREPARED